

King County Office of Citizen Complaints - Ombudsman

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Public Disclosure R	lequest		
Pursuant to the Washington State Pub following Ombudsman's Investigation [please be as specific as possible by in identifying information]:	records be m	nade available for rev	iew and copying
I agree to pay fees, if necessary, to pro (Initial) If the costs associated with the for approval. All fees must be paid be must be made by cash, money order, County.	e request are fore records	above \$10 we will care copied and relea	ontact you first sed. Payment
Name (please print)			
Address			
City	State	Zip Code	
Phone number(s)			
Signature		Date	

Please note that RCW 42.17.310 and other state and federal law exempts certain records from public disclosure. If the records, or portions of the records, that you request are not subject to disclosure, we will inform you of the applicable exemption. This form may only be used to request documents that are part of the Office of Citizen Complaints – Ombudsman records.